



02784585

APPLICATION FOR REGISTRATION OF A FOREIGN LIMITED LIABILITY

Pursuant to A.R.S. §29-802 et seq.

1. The company name must contain an ending which may be "limited liability company," "limited company," or the abbreviations "L.L.C.," "L.C.," "LLC" or "LC". If you are the holder or assignee of a tradename, attach a copy of the tradename certificate. If your name is not available for use in Arizona, you must adopt a fictitious name and provide a resolution adopting the name, which must be signed by a manager, member or authorized agent.

2. Provide the name of the state or jurisdiction under whose laws your company was formed.

3. Provide the date on which your company organized in the state or jurisdiction under whose laws it was formed.

4. Provide the general character of business you plan to transact in Arizona.

5. The statutory agent must provide a street address. If statutory agent has a P.O. Box, then they must also provide a street address/location.

The agent must consent to the appointment by executing the consent.

1. The name of the foreign limited liability company is:
Blue Horizons Group LLC
1. a. If the exact name of the foreign limited liability company is not available for use in this state, then the fictitious name adopted for use by the limited liability company in Arizona is:
_____(FN)_____
2. The company is organized under the laws of: Nevada
(State)
3. The date of the company's formation is: November 22, 2006
4. The purpose of the company or the general character of business it proposes to transact in Arizona is: Marketing
5. The name and street address of the statutory agent for the foreign limited liability company in Arizona is: Capitol Corporate Services, Inc.
815 N. 1st Ave., Ste 4
Phoenix, AZ 85003

ACCEPTANCE OF APPOINTMENT BY STATUTORY AGENT

I, Capitol Corporate Services, Inc., having been designated to act as
(Print Name)
statutory agent, hereby consent to act in that capacity until removed or resignation is submitted in accordance with the Arizona Revised Statutes.

Dellanie Case, asst. sec.
Signature

Capitol Corporate Services, Inc.
If signing on behalf of a company, print company name here

LL:0005
Rev. 10/2006

AZ CORPORATION COMMISSION
FILED

MAY 18 2009

FILE NO. R-1527243-4

6. Check which management structure will be applicable to your company. Provide name, title and address for each person.

7. If the jurisdiction under the law of which your company is formed, you must provide the address of the principle office of the company, in whatever state or jurisdiction it is located.

The application must be signed by a member, manager or duly authorized agent.

Attach a certificate of existence or document of similar import duly authenticated (within sixty (60) days) by the official having custody of corporate records in the state, province or county under whose laws the corporation is incorporated.

Your phone and fax numbers are optional.

LL:0005
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6. Management Structure (select option A or B):

A ☒ **Management of the limited liability company is vested in a manager or managers.** The names and addresses of each person who is a manager AND each member who owns a twenty percent or greater interest in the capital or profits of the limited liability company are:

Name: Silver State Management Services, LLC

[] member ☒ manager

Address: P.O. Box 6957

City, State, Zip: Stateline, NV 89449

Name: Innovative Energy Technologies LLC

☒ member [] manager

Address: PO Box 4470

City, State, Zip: Stateline, NV 89449

B ☐ **Management of the limited liability company is reserved to the members.**

The names and addresses of each person who is a member are:

Name: _____

Address: _____

City, State, Zip: _____

Name: _____

Address: _____

City, State, Zip: _____

Name: _____

[] member [] manager

Address: _____

City, State, Zip: _____

Name: _____

[] member [] manager

Address: _____

City, State, Zip: _____

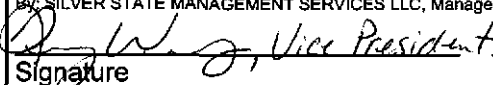
7. The address of the office required to be maintained in the jurisdiction under the laws of which the company is organized, if required; or, if not required, the address of the principal office of the company is: 297 Kingsbury Grade Suite 100 Mail Box 4470

Stateline, NV 89449-4470

Executed this 14th day of May, 2009

By: SILVER STATE MANAGEMENT SERVICES LLC, Manager

By: SILVER STATE MANAGEMENT SERVICES, Manager

Signature: 

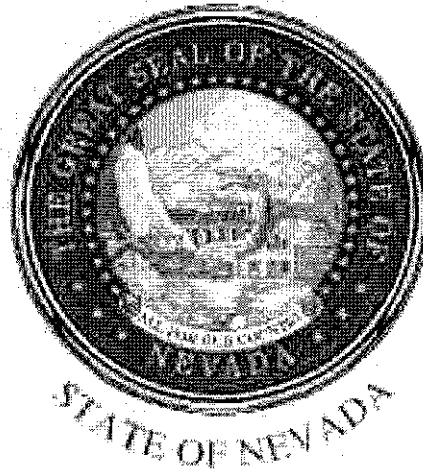
By: Terry Wells, Its Vice President

Print Name (Check One) ☐ Member ☒ Manager ☐ Authorized Agent

PHONE: (800) 553-0615

FAX: (775) 589-1001

SECRETARY OF STATE



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

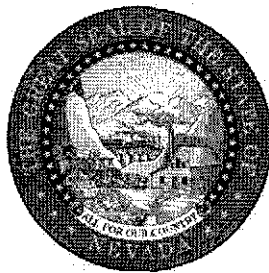
I, ROSS MILLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **BLUE HORIZONS GROUP LLC**, as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since November 22, 2006, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on May 14, 2009.

A handwritten signature in black ink, appearing to read "Ross Miller".

ROSS MILLER
Secretary of State



Electronic Certificate
Certificate Number: C20090514-2511
You may verify this electronic certificate
online at <http://www.nvsos.gov/>